

Effective November 10, 1998

Application or Docket Number

09/224,558

		CLA		S FILED	- PART I	column 2)	)	SMAL	L ENTITY	OR		R THAN LENTITY
F	OR		NUMB	ER FILED		R EXTRA	1	RATE	FEE	<b>7</b>	RATE	FEE
B	ASIC FEE				<u> </u>				380.0	OR		760.00
T	OTAL CLAIMS		27	minus	s 20= *			X\$ 9=				126
IN	DEPENDENT (	CLAIMS	9	minu	s 3 = *	···	1		-			110
Μl	JLTIPLE DEPE	NDENT	CLAIM P	RESENT	Υ			X39=	-	OR	X78=	468
* 14	If the difference in column 4 is less than 1000 to 100							+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1,354
-	(	(Colu	<u>ımn 1)</u>	MENDE	D - PART II (Column 2)	(Column 3)		SMALL	ENTITY	OR		THAN ENTITY
AMENDMENT A		REM.	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
NDN	Total -	*		Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*		Minus	***	=	Ī	X39=		OR	X78=	
	FINST PRESI	ENTATIO	N OF MU	JLTIPLE DE	PENDENT CLA	М	r	+130=		7	+260=	
					•		L	TOTAL		OR	TOTAL	
		(Colu	mn 1)		(Column 2)	(Column 2)	A	DDIT. FEE		JOR ,	ADDIT. FEE	<u> </u>
a		CL	MS		HIGHEST	(Column 3)			ADDI	7 'r		r
AMENDMENI		AF	INING TER OMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ב ב	Total			Minus	**	=		X\$ 9=		OR	X\$18=	
ME	Independent	*		Minus	***	=	┟	X39=		OR	X78=	
	FIRST PRESE	NIAHOI	V OF MU	LTIPLE DE	PENDENT CLAI	M	-	.120		1		
			•				L	+130=		OR	+260=	
							AD	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE	
7		(Colui				-(Column 3)						
J. L.		REMA AFT AMEND	INING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**	=		X\$ 9=	<u> </u>		X\$18=	FEE
	ndependent	*		Minus	***	=	-			OR		
	FIRST PRESE	NTATION	OF MU	TIPLE DEF	PENDENT CLAIM	И	$\perp$	X39=		OR	X78≃	
· If 1	the entry in colur	nn 1 is lec	s than the	entry in col-	mn 2, write "0" in c		L	130=		OR	+260=	į
- 11	ine mignest Nur	nder Previ	ousiv Pak	I For" IN THI	mn 2, write "0" in c S SPACE is less th S SPACE is less th	05 00 anter 100 t	ADI	TOTAL DIT. FEE		OR A	TOTAL DDIT, FEE	
η	ne "Highest Num	ber Previo	usly Paid	For" (Total or	Independent) is the	ian 3, enter "3." ie highest number f			ropriate box	c in colu	mn 1.	

## This Forms for INTERNAL PTO SE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: <u>C9/224,558</u>

## Total Fee Calculation

	2 out 2 of Calculation									
	Fee Code	Total # Claims	Number Extra	х	Fee	Fee		Total		
	Sm./Lg.				Sm. Entity	Lg. Entity	,	Total		
Basic Filing Fee	201/101					8	=	760		
Total Claims >20	203/103	<u>27</u> -20 =	7_	х		10	=	126		
Independent Claims >3	202/102	-3=	6	х		78		468		
Mult. Dep Claim Present	204/104						=	<del></del>		
◆ Surcharge	205/105	· •				-	=	130		
*English Translation	_139						= ,			
TOTAL FEE CALCULA	ATION				·	<b>.</b>		 1. 484		
Fees due upon filing t	he application:									
Total Filing Fees Due	= \$ //	[84]		<del></del> -						
Less Filing Fees Subn	nitted -\$				j					
BALANCE DUE	=\$ //	184								
Office of Initial Patent	Examination		-			-				

FORM OIPE-RAM-01 (Rev. 12/97)